



Fit Pass 2015 Participant Sign Up Sheet

Please fill out and submit this sheet to any Fit Pass representative to get started playing Fit Pass 2015!

Name: _____

Date: _____

Age: _____ Gender: M _____ F _____

E-mail Address: _____

Zip Code: _____

Where did you get your Fit Pass activity passport?: _____

Humana Vitality ID (If applicable): _____

Which best describes your current activity level? (Please check one)

_____ Not very active or sedentary (Less than 75 minutes per week)

_____ Somewhat Active (At least 75 minutes per week)

_____ Moderately Active (At least 150 minutes per week)

_____ Very Active (More than 150 minutes per week)